

Please type a plus (+) sign inside this box -

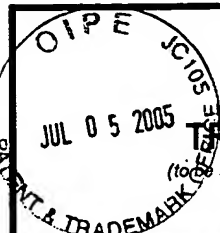
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PTO/SB/21 REV 1 (12/97)

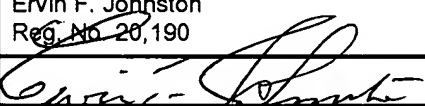
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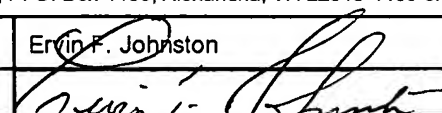
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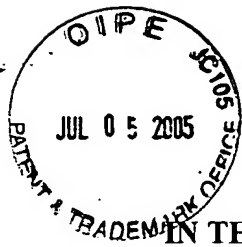
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 TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/630,817	
	Filing Date	07/29/2003	
	First Named Inventor	Pinarbasi	
	Examiner Name	Julie Anne Watko	
	Group Art Unit	2653	
Total Number of Pages in This Submission	2 + postcard	Attorney Docket Number	HSJ920030030US1

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Formal Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Response	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition Checklist and Accompanying Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> To Convert a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Power of Attorney, Revocation	<input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below):
<input type="checkbox"/> Information Disclosure Statement ___ PTO Form 1449 ___ (no.) cited references	<input type="checkbox"/> Change of Correspondence Address	<u>POSTCARD</u>
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Terminal Disclaimer	<u>PHONE NUMBER CHANGES</u>
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application ___ PTO Form 1533 ___ Response to Missing Parts Under 37 CFR 1.52 or 1.53	Remarks:	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual Name	Ervin F. Johnston Reg. No. 20,190
Signature	
Date	JULY 1, 2005

CERTIFICATE OF MAILING			
I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450 on this date: <u>JULY 1, 2005</u>			
Typed or printed name	Ervin F. Johnston	Date	JULY 1, 2005
Signature			



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)
)
Pinarbasi) Group No.: 2653
)
Serial No.: 10/630,817) Examiner: Julie Watko
)
Filed: 7/29/2003) Docket No. HSJ920030030US1
)
For: CURRENT PERPENDICULAR TO THE)
PLANES (CPP) SENSOR WITH HIGHLY)
CONDUCTIVE CAP LAYER STRUCTURE)

Commissioner for Patents
P. O. Box 1450
Alexandria, VA 22313-1450

Sir:

PHONE NUMBER CHANGES FOR THE UNDERSIGNED

All previous phone numbers listed for the undersigned are to be deleted. The new phone numbers for the undersigned are as follows:

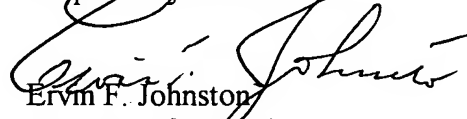
808-661-1195 (Voice)

619-602-4597 (Cell)

808-661-1198 (Fax)

Should there be any question regarding these changes the USPTO is requested to contact the undersigned.

Respectfully submitted,


Ervin F. Johnston
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Telephone: 808-661-1195 (Voice)
619-602-4597 (Cell)
808-661-1198 (Fax)